



PATENT

ATTORNEY DOCKET N°: 03-0023  
EXPRESS MAIL LABEL N°: EV 380 206 503 US

**ORIGINAL PATENT APPLICATION TRANSMITTAL LETTER**

MAIL STOP PATENT APPLICATION  
COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VA 22313-1450



Transmitted herewith for filing is the patent application of:

**INVENTORS:**

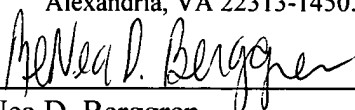
Andrew Hadley	David So	Mark Slutz
4970 Granby Circle	2635 Hanovertown Dr	2630 Vidalia Terrace
Colorado Springs, CO 80919	Colorado Springs, CO 80919	Colorado Springs, CO 80919
Citizen of United States	Citizen of United States	Citizen of United States

**Title: Software Method for Exhaustive Variation of Parameters, Independent of Type**

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**CERTIFICATION UNDER 37 C.F.R. §1.10**

I hereby certify that this Original Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on this date, January 22, 2004 in an envelope as "Express Mail Post Office to Addressee", Mailing Label N° EV 380 206 503 US, with sufficient postage, addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

  
\_\_\_\_\_  
ReNea D. Berggren

DATED: January 22, 2004

**1. Type of Application**

This is an Original Application.

**2. Benefit of Prior U.S. Application(s) (35 U.S.C. § )**

USSN

Filing Date

Inventor(s)

Status

**3. Papers Enclosed That Are Required for Filing Date under 37 C.F.R. §1.53(b) (Regular) or 37 C.F.R. §1.153 (Design) Application**

Eight (8) Pages of Specification;  
Seven (7) Pages of Claims;  
One (1) Page of Abstract; and  
Four (4) Sheets of Drawing Figures.

**4. Additional Papers Enclosed**

None.

**5. Declaration or Oath**

The signed Declaration and Power of Attorney is attached

**6. Inventorship Statement**

The inventorship for all the claims in this application are the same.

**7. Language**

English.

**8. Assignment**

The signed Assignment is attached. The Recordation Form Cover Sheet is enclosed.

**9. Certified Copy**

None are required.

**10. Fee Calculation (37 C.F.R. §1.16)**

BASIC FEE							\$770.00
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EXCESS CLAIM FEE							
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TOTAL OVER TWENTY	43	-20	=	23	X \$18.00	\$414.00
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INDEPENDENT OVER THREE	4	-3	=	1	\$86.00	\$86.00
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MULTIPLE DEPENDENT				0	\$290.00	\$0.00
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ASSIGNMENT RECORDATION FEE					\$ 40.00	\$40.00
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TOTAL FILING FEES						<u><u>\$1,310.00</u></u>
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**11. Small Entity Statement(s)**

None required.

**12. Request for International - Type Search (37 C.F.R. §1.104(d))**

None required.

**13. Authorization to Charge Fees**

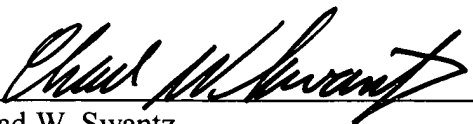
The Commissioner is hereby authorized to charge the filing fees of **\$1,310.00** to Deposit Account N<sup>o</sup> 12-2252. Please charge any underpayments related to this filing or credit any excess to Deposit Account N<sup>o</sup> 12-2252. A copy of this *Transmittal* is enclosed for accounting purposes only.

Please direct all correspondence and telephone calls to:

**CUSTOMER NO. 24319**  
PETER SCOTT  
LEGAL DEPARTMENT - IP  
LSI LOGIC CORPORATION  
M/S D-106  
1621 BARBER LANE  
MILPITAS, CA 95035

DATED: January 22, 2004.

Respectfully submitted,  
Andrew Hadley et al.,  
LSI Logic Corporation,

By   
Chad W. Swantz  
Reg. N<sup>o</sup> 46,329

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**This Transmittal Ends With This Page.**